

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813 or P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: (808) 587-0460 FAX: (808) 587-0470 email: ethics@hawaiiethics.org

Web site: www.hawaii.gov/ethics

NOTE: This is a public document.

THIS SPACE FOR OFFICE USE ONLY

'13 JAN 22 P1 51

LOBBYIST REGISTRATION FORM

KIVI STATE OF HAWAII
STATE ETHICS COMMISS (Type or Print Clearly) **PART I LOBBYIST** NAME (Last) (Middle) **TELEPHONE** (First) R.O. Karamatsu Christine 539-0841 MAILING ADDRESS (Street) FAX 533-4945 1099 Alakea Street, Suite 1400 **EMAIL** ckaramatsu@awlaw.com (City) (State) (Zip Code) Honolulu HI 96813 EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) **TELEPHONE** Slovin & Ito, LLP 539-0400 MAILING ADDRESS (Street) FAX 533-4945 1099 Alakea Street, Suite 1400 **EMAIL** (City) (State) (Zip Code) Honolulu ΗΙ 96813

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LO	TELEPHONE		
Consumer Data Industry As	202-408-7407		
MAILING ADDRESS (Street)		FAX 202-371-0134	
1090 Vermont Ave, N.W., Suite 200		EMAIL	
(City)	(State)	(Zip Code)	
Washington DC		20005	
NAME OF PERSON RESPONSIBLE FOR	TELEPHONE		
Eric Ellman		202-408-7407	
MAILING ADDRESS (Street)		FAX 202-371-0134	
1090 Vermont Ave, N.W., Suite 200		EMAIL eellman@cdiaonline.org	
(City)	(State)	(Zip Code)	
Washington DC	•	20005	

LREG 09/2009 Page 1 of 2

PART III DESCRIPTION	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBE	3Y		
Agriculture	☐ Education	☐ Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	☐ Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & WaterUse Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections			
			· ·		
PART IV CERTIFICATION OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
Christi Kt			1/18/13		
(Signature of Lobbyist) (Date)					
PART V AUTHORIZATION TO LOBBY					
NAME		TITLE OF AUTHORIZING OFFIC	ER OR PERSON REPRESENTED		
Eric Ellman					
NAME OF ORGANIZATION (if applicable)			TELEPHONE		
Consumer Data Industry Association			202-408-7407		
MAILING ADDRESS (Street)			FAX 202-371-0134		
1090 Vermont Ave, N.W., Suite 200			EMAIL eellman@cdiaonline.org		
(City) (State)//			(Zip Code)		
Washington DC			20005		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.					
(Signature of Authorizing/Officer or Person Represented)			(Date)		

LREG 09/2009 Page 2 of 2